

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Gordon D. Ross (Deceased)

Application No.: 10/526,185

Group: 1628

371(c) Date: August 3, 2005

Examiner: Ricci, Craig D.

Confirmation No.: 6460

For: Cancer Therapy Using Beta Glucan And Antibodies

| | |
|---|-----------|
| CERTIFICATE OF MAILING OR TRANSMISSION | |
| I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on: | |
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Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment, Supplemental Information Disclosure Statement, and Request for Continued Examination (RCE) for filing in the above-identified application.

- ☒ Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.
- ☐ A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

| | | | | | SMALL ENTITY | | OTHER THAN SMALL ENTITY | | | |
|--|----------------------------------|-------|---------------------------------|---------------|--------------|------------|-------------------------|--------------|------------|----|
| | CLAIMS REMAINING AFTER AMENDMENT | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE | OR | RATE | ADDIT. FEE | |
| TOTAL | 7 | MINUS | * 20 | 0 | X \$ 26 | \$ | | X \$52 | \$ | |
| INDEP | 4 | MINUS | ** 6 | 0 | X \$110 | \$ | | X \$220 | \$ | |
| <input type="checkbox"/> FIRST PRESENTATION OF MULTIPLE DEP. CLAIM | | | | | + | \$195 | \$ | + | \$390 | \$ |
| | | | | | TOTAL = \$ 0 | | | TOTAL = \$ 0 | | |

* not fewer than 20
** not fewer than 3

The Application Size Fee has been calculated as shown below:

(Effective for cases filed on or after December 8, 2004)

| Actual Sheets (Including current amendment) | Highest No. of Sheets Paid For (At least 100) | No. of Additional Units Required (Increments of 50 sheets) | SMALL ENTITY | | OTHER THAN SMALL ENTITY | | Payment Sufficient for up to |
|---|---|--|--------------|-------------------|-------------------------|-------------------|------------------------------|
| | | | Rate | Total Amount Owed | Rate | Total Amount Owed | |
| 93 | 100 | | X \$135 | \$[] | X \$270 | \$[] | 100 Sheets |

Petition for Extension of Time

- ☐ Applicant hereby petitions to extend the time to respond to the [] dated [] for [] month(s) from [] to []. The appropriate fee is set forth below.
- ☐ *[For action-specific language in an extension of time, select the appropriate option from the Firm Templates]*

| | | | |
|-------------------------------------|---|----|-------|
| <input type="checkbox"/> | Petition for [] month Extension of Time | \$ | <hr/> |
| <input type="checkbox"/> | Claims Fee | \$ | <hr/> |
| <input type="checkbox"/> | Application Size Fee | \$ | <hr/> |
| <input checked="" type="checkbox"/> | Other Fees: | | |
| | RCE Fee | \$ | 405 |
| | <hr/> | \$ | <hr/> |
| | <hr/> | | |
| | TOTAL: | \$ | 405 |

| | | |
|--------------------------|---|----------|
| <input type="checkbox"/> | Petition for [] month Extension of Time | \$ _____ |
| <input type="checkbox"/> | Claims Fee | \$ _____ |
| <input type="checkbox"/> | Application Size Fee | \$ _____ |
| <input type="checkbox"/> | Other Fees: | _____ |
| | | \$ _____ |
| | | \$ _____ |
| | TOTAL: | \$ _____ |

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.

Dated: March 21, 2011